



## An exploration of role model influence on adult nursing students' professional development: A phenomenological research study



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### SUMMARY

Patients' expectations of being cared for by a nurse who is caring, competent, and professional are particularly pertinent in current health and social care practice. The current drive for NHS values-based recruitment serves to strengthen this. How nursing students' development of professionalism is shaped is not fully known, though it is acknowledged that their practice experience strongly shapes behaviour.

This study (in 2013–14) explored twelve adult nursing students' lived experiences of role modelling through an interpretive phenomenological analysis approach, aiming to understand the impact on their development as professional practitioners.

Clinical nurses influenced student development consistently. Some students reported that their experiences allowed them to learn how not to behave in practice; a productive learning experience despite content. Students also felt senior staff influence on their development to be strong, citing 'leading by example.' The impact of patients on student professional development was also a key finding.

Through analysing information gained, identifying and educating practice-based mentors who are ready, willing, and able to role model professional attributes appear crucial to developing professionalism in nursing students. Those involved in nurse education, whether service providers or universities, may wish to acknowledge the influence of clinical nurse behaviour observed by students both independent of and in direct relation to care delivery and the impact on student nurse professional development. A corollary relates to how students should be guided and briefed/debriefed to work with a staff to ensure their exposure to a variety of practice behaviours.

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### Introduction

Role models have been described as people we identify with, those who have qualities we would like to have, are in positions we would like to reach (Paice et al., 2002), or exemplify behaviours and attitudes that are emulated by others (Perry, 2009; Price and Price, 2009).

Many individuals are positioned to influence nursing students including untrained clinical support workers, academic staff, patients, fellow students, and particularly, clinical nursing staff (Charters, 2000; Donaldson and Carter, 2005, & Lewis and Robinson, 2003; Melia, 1984, 1987; Ogier, 1982; Perry, 2009). Recent high-profile reports provide evidence that the professionalism of nursing is being called into question (DH, 2013a, 2013b). The Mid Staffordshire NHS Foundation Trust Public Inquiry (the Francis report DH, 2013a), in particular, found failings at Trust board level though noted significant failings in the nursing care provided to patients residing at the Trusts' main hospital. An associated area of concern is the impact of being exposed to such poor standards

of care on the development of nursing students placed within the Trust. As explained by Robert Francis QC (DH, 2013a), 'this led in turn to a declining professionalism and tolerance of poor standards.' Exploration of role modelling experiences is vital to facilitate student learning in relation to expected behaviours. It is thus important to identify and capitalise on the positive influences of role modelling while recognising the impact of negative role modelling and the influence this can have. For the purposes of this study, the term *role model* was defined as someone who influences behaviour by exemplifying the practical, professional, and/or personal traits expected for nursing and therefore emulated by others.

Chow and Suen (2001) suggested that students are likely to have pre-conceived perceptions of nursing before they start their pre-registration programme and it is thought this may influence who they choose as a role model.

Senior staff influence nursing students' professional development as role models (Lewis and Robinson, 2003; Perry, 2009) by working with the learner at the same time as completing their work (Ogier, 1982). Ogier's study is seminal and has been referenced in many subsequent studies. Students perceive ward sisters/charge nurses as a key learning resource and it is clear they can play a significant role in professional development (Fretwell, 1982). Subsequent research has, however,

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indicated that junior nurses report little role modelling of holistic care by senior staff (Henderson, 2002). Therefore, what students are actually learning requires further exploration though this is not part of the remit of this study.

Mentors also actively influence students' learning (NMC, 2008). Mentors are considered experts in a field of clinical practice and spend time with the student supporting and guiding their professional development (Ettinger, 1991; Kenny, Mann and MacLeod, 2003). Past research (Marson, 1982) has suggested that nurses prepared for this role tend to be more sensitive to the needs of learners, provide appropriate feedback, and demonstrate a personal value system through care and concern for others. It has been suggested that in order to care for patients effectively, those delivering the care need to be cared for themselves (Smith, 2008). Demonstration of these values is therefore vital for student professional development (Ogier, 1989), particularly in the wake of Francis, and facilitating students' professional socialisation. Within this study, a mentor was defined as a practitioner who actively supports and guides a learner within the competency framework defined by a professional or statutory regulatory body.

The limited information available regarding whether patients are or can be role models for students is focused on the general impact of their engagement in nurse education as opposed to specific impact on the development of professional qualities. It is, however, conceivable that patient reaction to care delivery may influence students when considering Bandura's social learning theory (Bandura, 1977). This theoretical framework identifies motivational processes as a key component in observational learning. Individuals are more likely to adopt modelled behaviour if it results in outcomes they value and also demonstrates positive consequences for others (Bandura, 1977). It is therefore suggested that how patients react to care delivery by student nurses may influence future performance in regard to that behaviour.

There is a clear link between professional socialisation and role modelling, thence the development of professionalism in student nurses. This includes the acquisition of skills, knowledge, professional identity, and an understanding of the cultural norms and values that underpin practice (Holland, 1999; Hoskin & Ewens, 1999; Price, 2009). Several studies have identified the importance to the neophyte nurse of nurses working in practice and who appear responsible for supporting the development of professional values (Brown et al., 2012; Melia, 1987). Nursing students can feel vulnerable when starting a new placement and may require social support, reassurance, and acceptance from established members of the community of practice they are confronted with (Cope et al., 2000; Spouse, 2001).

Students appear to believe that they need to adapt (Melia, 1987) to the environment in order to learn. In some cases, this can mean emulating poor practice, particularly if this is the norm, and compromising on their idealised concept of care delivery (Henderson, 2002). Henderson (2002) also found that student nurses were 'desensitised' during their professional socialisation and were often faced with discrepancies between the values taught within the educational environment and those witnessed within practice. Role modelling, however, has been identified as an accepted method to facilitate the development of professional values but evidence has suggested they are not demonstrated within practice (Savage, 1998). Students' allegiance to clinical nursing staff serves to emphasise the importance of good role models (Murray and Main, 2005).

## Aim and Research Questions

The aim of this study was to explore nursing students' choice of role models and their lived experience of role modelling with a particular focus on the development of adult nursing students as professional practitioners. The research addressed the following questions:

1. How do adult nursing students experience role modelling and what does this mean to them?

2. In what ways do adult nursing students understand the impact of role modelling experiences on their development as professional practitioners?

## Research Design

The study adopted a qualitative approach based on interpretative phenomenological analysis (IPA) (Smith, 2004) to allow in-depth exploration with participants of their lived experiences.

All students in years 1, 2, and 3 of the BSc Hons Adult Nursing were invited to take part; however, in order to achieve the homogenous sample advised by the IPA approach to reduce the variation that could influence any analysis of the phenomenon, only female students were ultimately selected. Female students represented the majority of the student group and only white British students volunteered, further reducing any potential variation. Through convenience sampling, twelve pre-registration adult nursing students volunteered to take part, four in each of 1st, 2nd, and 3rd years of the programme. The sample was stratified according to age to ensure an equal number of young (18–25) and mature (25+) students.

The twelve students participated in individual face-to-face in-depth interviews which were non-structured to allow exploration of the phenomenon that were most important to them. Prompts and probes were used to 'guide' the interview and facilitate the participants' reflection on their experiences. Time was provided for the participants to answer fully any questions posed during the course of conversation and the interviews were only terminated once they had nothing further to add. The interviews, which lasted between 25 and 60 minutes, were audio-taped for later transcription and were conducted in an environment of the students choosing. Participants were coded P1–P12.

Interview transcripts in phenomenological research provide a description of the participants' lived experiences. These are then ready for the analysis of meanings (Todres and Holloway, 2010) followed by formulation of these meanings into coherent stories of interrelated themes and insights. Several stages of thematic analysis were undertaken using IPA as this approach adhered to guidelines regarding rigour and validity in qualitative research studies (Pringle, Hendry and McLafferty, 2011).

Various measures were taken to ensure rigour within the study. Most significantly, these included proportional representation of students within the results, the use of direct quotations from students and member checking of the initial interpretations of interview transcripts to ensure they were an accurate representation of the students views.

## Ethical Considerations

Full ethical approval was granted by the University Research Ethics Committee (12/EDU/047—granted 13.11.2012). All participants volunteered for the study, provided informed consent prior to data collection. They were assured that taking part or withdrawing would not affect their studies in any way, and their privacy and anonymity were maintained at all times. The interviews were conducted in a location of the student's choosing, on campus and not in the researchers' office so as to provide a 'neutral' environment in which to collect the data. Casual dress worn by the researcher during data collection also served to minimise the impact of any perceived power imbalance.

## Results and Analysis

Only female white British students on the degree programme at the same campus volunteered. Ages ranged from 21 to 42 with a mean age of 29. The analysis of the information gained through interview did not identify any findings of note in relation to the participant's age and therefore there is no distinction made in regard to this demographic.

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